

## **HEALTH QUARTERLY STATEMENT**

AS OF MARCH 31, 2018 OF THE CONDITION AND AFFAIRS OF THE

## Martin's Point Generations Advantage, Inc.

NAIC	Group Code <u>0000</u> <u>000</u>		Code <u>15850</u> Employer's	ID Number47-4682941
Organized under the Laws of	(Current) (Pric Maine	,	, State of Domicile or Port of E	Entry ME
Country of Domicile		United States	s of America	
Licensed as business type:		Health Maintenar	nce Organization	
Is HMO Federally Qualified? Ye	s[X]No[]			
Incorporated/Organized	07/31/2015		Commenced Business	01/01/2016
Statutory Home Office	331 Veranda Str	- et	<del>-</del>	Portland , ME, US 04103
Statutory Florine Office	(Street and Numb		(City or	Town, State, Country and Zip Code)
Main Administrative Office		331 Veran	da Street	
	Portland , ME, US 04103	(Street and	l Number)	207-774-5801
-	wn, State, Country and Zip Cod	e)	(A	rea Code) (Telephone Number)
Mail Address	PO Box 9746	,	F	Portland , ME, US 04104-5040
	(Street and Number or P.O.			Town, State, Country and Zip Code)
Primary Location of Books and R	ecords	27 North	port Drive	
,		(Street and		007.050.0004
-	Portland , ME, US 04103 own, State, Country and Zip Cod	, e)	(A	207-253-6224 rea Code) (Telephone Number)
Internet Website Address		www.martir	espoint org	,, ,
			ispoint.org	
Statutory Statement Contact		ire Neuville ame)	· .	207-253-6118 (Area Code) (Telephone Number)
patrio	ia.neuville@martinspoint.org			207-253-6227
	(E-mail Address)			(FAX Number)
		OFFIC	_	
President Treasurer			Secretary	David Emery Currier
	Zamara onance z	•		
		OTF Sandra Lynn Monfiletto,	IER Chief Operating Officer -	
Daniel Bruce Chojnowski,	Chief Financial Officer		d Services	
		DIRECTORS C		
Robert Adair M  David Hermon Howe			ıba MD, Vice Chair ric Thomas	Edward Charles Dupont, Jr Treasurer Barbara Elizabeth Tretheway JD
Daniel Kent C	- ,		er Hester, Jr PhD	Ronald Fitzjohn Dixon MD
Edward Stewar	t McKersie	Cathleen Elisab	eth Morrow MD #	
04-44	Maina			
State of County of	Maine Cumberland	— SS:		
•				
all of the herein described asset statement, together with related condition and affairs of the said r in accordance with the NAIC An rules or regulations require diff respectively. Furthermore, the s	s were the absolute property of exhibits, schedules and explana eporting entity as of the reportinual Statement Instructions and erences in reporting not relate cope of this attestation by the common supports the cope of the sattestation of the common supports the cope of the common supports the cope of the common supports the cope of the common supports the commo	f the said reporting entity tions therein contained, a g period stated above, an Accounting Practices an d to accounting practice lescribed officers also inc	, free and clear from any liens nnexed or referred to, is a full a d of its income and deductions d Procedures manual except to and procedures, according ludes the related correspondin-	orting entity, and that on the reporting period stated above, or claims thereon, except as herein stated, and that this nd true statement of all the assets and liabilities and of the therefrom for the period ended, and have been completed to the extent that: (1) state law may differ; or, (2) that state to the best of their information, knowledge and belief, g electronic filing with the NAIC, when required, that is an be requested by various regulators in lieu of or in addition
David Hermon Howe President	es MD	Daniel Bruce Chief Finan	-	
Subscribed and sworn to before a	ne this		a. Is this an original filing     b. If no,         1. State the amendment	

3. Number of pages attached......

## **ASSETS**

	_		Current Statement Date		4
		1 Acceta	2 Nanadmitted Assets	Net Admitted Assets	December 31 Prior Year Net Admitted Assets
	D /	Assets	Nonadmitted Assets	(Cols. 1 - 2)	
1.	Bonds	36,325,990		36,325,990	36,036,836
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks	17,074,641		17,074,641	17, 108, 128
3.	Mortgage loans on real estate:				
-	3.1 First liens			0	0
	3.2 Other than first liens.			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$				
	encumbrances)			0	0
	4.2 Properties held for the production of income (less				
	\$encumbrances)			0	0
	,				
	4.3 Properties held for sale (less \$				
	encumbrances)			0	0
5.	Cash (\$50,779,401 ), cash equivalents				
	(\$614,410 ) and short-term				
	investments (\$0 )	E1 202 011		51 202 911	17 001 202
_	·				
6.	Contract loans (including \$ premium notes)				
7.	Derivatives			0	0
8.	Other invested assets			0	0
9.	Receivables for securities			0	0
10.	Securities lending reinvested collateral assets				0
	Aggregate write-ins for invested assets				
11.					
12.	Subtotals, cash and invested assets (Lines 1 to 11)	104 , 794 , 442	0	104,794,442	
13.	Title plants less \$ charged off (for Title insurers				
	only)			0	0
14.	Investment income due and accrued	188,249		188,249	203,889
15.	Premiums and considerations:				
10.	15.1 Uncollected premiums and agents' balances in the course of collection.	1 2/2 /00	444 510	700 000	764 472
		1,243,430	444,310	190,900	104,472
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$37,974,898 ) and				
	contracts subject to redetermination (\$ )	37 974 898		37 974 898	27 928 928
10		, 10, 174,000			27,020,020
16.	Reinsurance:				•
	16.1 Amounts recoverable from reinsurers			0	0
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
17.	Amounts receivable relating to uninsured plans	572,307	331,662	240,645	240,645
18.1	Current federal and foreign income tax recoverable and interest thereon			0	0
	Net deferred tax asset				0
18.2				0	
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software			0	0
21.	Furniture and equipment, including health care delivery assets				
	(\$			0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
	Receivables from parent, subsidiaries and affiliates				494 , 128
23.					
24.	Health care (\$ ) and other amounts receivable				0
25.	Aggregate write-ins for other than invested assets	0	0	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	153,992,686	9,995,464	143,997,222	99,868,419
27.	From Separate Accounts, Segregated Accounts and Protected Cell				•
	Accounts			0	0
28.	Total (Lines 26 and 27)	153,992,686	9,995,464	143,997,222	99,868,419
	DETAILS OF WRITE-INS				
1101.				0	0
				0	0
1102.					
1103.				0	0
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.				0	0
2502.				0	
2503.				0	0
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	0

## LIABILITIES, CAPITAL AND SURPLUS

			Current Period		Prior Year
Ì		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$ reinsurance ceded)			39.925.958	
2.	Accrued medical incentive pool and bonus amounts			2,928,961	, , ,
3.	Unpaid claims adjustment expenses			1,015,617	
4.	Aggregate health policy reserves, including the liability of				
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act	434,528		434,528	434,528
5.	Aggregate life policy reserves			0	0
6.	Property/casualty unearned premium reserve	-			0
7.	Aggregate health claim reserves				0
8.	Premiums received in advance				498,749
9.	General expenses due or accrued	280		280	0
10.1	Current federal and foreign income tax payable and interest thereon				
l	(including \$ on realized gains (losses))			0	
	Net deferred tax liability				0
11.	Ceded reinsurance premiums payable				0
12. 13.	Amounts withheld or retained for the account of others				0
14.	Borrowed money (including \$ current) and				0
14.	interest thereon \$(including				
	\$ (morading			0	0
15.	Amounts due to parent, subsidiaries and affiliates				0
16.	Derivatives				0
17.	Payable for securities				0
18.	Payable for securities lending			0	0
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized				
	reinsurers and \$ certified reinsurers)			0	0
20.	Reinsurance in unauthorized and certified (\$				
	companies			0	
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans			2,255,103	2,575,115
23.	Aggregate write-ins for other liabilities (including \$				
	current)			0	
	Total liabilities (Lines 1 to 23)				42,948,190
25.	Aggregate write-ins for special surplus funds		XXX		0
26. 27.	Common capital stock				
28.	Gross paid in and contributed surplus				150 100 000
29.	Surplus notes				
30.	Aggregate write-ins for other than special surplus funds				0
31.	Unassigned funds (surplus)				(93, 179, 771)
32.	Less treasury stock, at cost:				
	32.1 shares common (value included in Line 26				
	\$)	xxx	XXX		
	32.2 shares preferred (value included in Line 27				
	\$	xxx			
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX		56,920,229
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	143,997,222	99,868,419
	DETAILS OF WRITE-INS				
2301.				0	0
2302.				<u>-</u>  -	0
2303.				0	0
2398.	Summary of remaining write-ins for Line 23 from overflow page		0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	0	0	0	0
2501.	Federal Affordable Care Act Assessment				0 0
2502. 2503.					0
2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2598. 2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX		0
3001.	Totals (Lines 2001 trirough 2003 plus 2096)(Line 20 above)				0
3001.					
3002.					
3098.	Summary of remaining write-ins for Line 30 from overflow page				0
- 500.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

## **STATEMENT OF REVENUE AND EXPENSES**

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	XXX			499,101
2.	Net premium income ( including \$ non-health				
	premium income)	XXX	108,365,403	96,825,181	390,687,185
3.	Change in unearned premium reserves and reserve for rate credits	XXX			
4.	Fee-for-service (net of \$ medical expenses)	XXX			0
5.	Risk revenue				
6.	Aggregate write-ins for other health care related revenues				
7.	Aggregate write-ins for other non-health revenues				
8.	Total revenues (Lines 2 to 7)	XXX	108,365,403	96,825,181	391,032,646
	Hospital and Medical:				
9.	Hospital/medical benefits				
10.	Other professional services				
11.	Outside referrals				
12.	Emergency room and out-of-area				EE 722 022
13.	Aggregate write-ins for other hospital and medical				
14. 15.	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)				
10.	Less:				
17.	Net reinsurance recoveries				
18.	Total hospital and medical (Lines 16 minus 17)				340.781.696
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$				
	containment expenses		2,925,573	2,200,810	11,873,339
21.	General administrative expenses				
22.	Increase in reserves for life and accident and health contracts				
	(including \$ increase in reserves for life only)			0	0
23.	Total underwriting deductions (Lines 18 through 22)	0	102,297,185	92,707,436	380,555,836
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	6,068,218	4,117,745	10,476,810
25.	Net investment income earned		295,387	237,677	1,123,505
26.	Net realized capital gains (losses) less capital gains tax of				
	\$				
27.	Net investment gains (losses) (Lines 25 plus 26)	0	276,925	143 , 166	1,013,466
28.	Net gain or (loss) from agents' or premium balances charged off [(amount				
	recovered \$ )				
	(amount charged off \$)])]				0
29.	Aggregate write-ins for other income or expenses	0	0	0	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	6 345 143	4,260,911	11 490 276
31.	Federal and foreign income taxes incurred			4,200,011	11,400,270
32.	Net income (loss) (Lines 30 minus 31)	XXX	6,345,143	4,260,911	11,490,276
02.	DETAILS OF WRITE-INS	7001	2,0.0,1.0	1,223,211	,,
0601.	Risk Sharing Revenue	XXX			345,461
0602.					0.0, .01
0603.		XXX			0
0698.		XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	345,461
0701.	- State (Emile 888) amough 6880 plue 8880/(Emile 8 above)	100/	-	-	0
0702.		1001			٥
0702.		XXX			٥
0798.	Summary of remaining write-ins for Line 7 from overflow page		n	n	 n
0798.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	n
1401.		,,,,,	, i	ı ı	0
1402.					۰
1402.		·			······
1498.	Summary of remaining write-ins for Line 14 from overflow page	·····	0		٥
1498.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0		0
2901.	Totalo (Lineo 1701 tinough 1400 plus 1430)(Line 14 above)	0	0	0	0
2902.					0
2903	Cummon of remaining units in faul in 20 from a conflant page				0
2998.	Summary of remaining write-ins for Line 29 from overflow page				
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	0

**STATEMENT OF REVENUE AND EXPENSES (Continued)** 

1	STATEMENT OF REVENUE AND	LAF LINGLO (C	2	3 3
		Current Year to Date	Prior Year to Date	Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	56,920,228	43,278,141	43,278,141
34.	Net income or (loss) from Line 32	6,345,143	4,260,911	11,490,276
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$	(99,374)	931,455	2,984,738
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			
39.	Change in nonadmitted assets	151,128	1,140,447	(832,927)
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0	0
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in	0	0	0
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	6,396,897	6,332,813	13,642,087
49.	Capital and surplus end of reporting period (Line 33 plus 48)	63,317,125	49,610,954	56,920,228
	DETAILS OF WRITE-INS			
4701.				0
4702.				0
4703.				0
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

## **CASH FLOW**

	CASITICAN		_	
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	130,328,420	117,268,290	382,564,297
2.	Net investment income	320,566	232,725	1,116,654
3.	Miscellaneous income	(580,583)	1,373,840	742,499
4.	Total (Lines 1 to 3)	130,068,403	118,874,855	384,423,450
5.	Benefit and loss related payments	87,923,978	82,632,095	337,956,517
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	9,494,870	9,089,846	36,300,482
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)	0	0	0
10.	Total (Lines 5 through 9)	97,418,848	91,721,941	374,256,999
11.	Net cash from operations (Line 4 minus Line 10)	32,649,555	27,152,914	10,166,451
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	2,625,629	17,625,050	25,107,367
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate			0
	12.5 Other invested assets	0	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,625,629	17,625,050	25, 107,367
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	2,950,710	18,139,303	26,800,215
	13.2 Stocks	57,962	0	350 , 166
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	11	9
	13.7 Total investments acquired (Lines 13.1 to 13.6)	3,008,672	18,139,314	27,150,390
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(383,043)	(514,264)	(2,043,024)
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	0	0
	16.3 Borrowed funds		0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders		0	0
	16.6 Other cash provided (applied)	2,035,906	(6,083,518)	(5,229,360)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	2,035,906	(6,083,518)	(5,229,360)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	34,302,418	20,555,132	2,894,067
19.	Cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	.,002,110		
	19.1 Beginning of year	17,091,393	14 , 197 , 326	14, 197, 326
		, 551,000		., ., ., ., ., .,

Note: Supplemental disclosures of cash flow information for non-cash transactions:		
	•	1

## **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1	Compreh (Hospital &	ehensive 4  & Medical)	5	6	7	8	9	10	
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	42,472	0	0	0	0	0	0	42,472	0	
2. First Quarter	43,885							43,885		
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	131,163							131,163		
Total Member Ambulatory Encounters for Period:										
7 Physician	147,955							147,955		
8. Non-Physician	64,286							64,286		
9. Total	212,241	0	0	0	0	0	0	212,241	0	
10. Hospital Patient Days Incurred	4,322							4,322		
11. Number of Inpatient Admissions	1,011							1,011		
12. Health Premiums Written (a)	108,365,403							108,365,403		
13. Life Premiums Direct										
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	108,365,403							108,365,403		
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services	87,923,978							87,923,978		
18. Amount Incurred for Provision of Health Care Services	92,739,392							92,739,392		

# CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims								
1	2	3	4	5	6	7		
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total		
Claims Unpaid (Reported)								
0299999 Aggregate accounts not individually listed-uncovered						C		
0399999 Aggregate accounts not individually listed-covered 0499999 Subtotals	3,964,660					3,964,660		
	3,964,660	0	0	0	0	3,964,660		
0599999 Unreported claims and other claim reserves						35,961,298		
0699999 Total amounts withheld								
0799999 Total claims unpaid						39,925,958		
0899999 Accrued medical incentive pool and bonus amounts						2,928,961		

## **UNDERWRITING AND INVESTMENT EXHIBIT**

#### ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR YE						
	Claims Paid Liability				5	6
	Year to		End of Curre	ent Quarter		
Line of Business	On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
Line of Educations	Ourient real	During the real	or mor rear	During the real	(Coldinilo 1 1 0)	i noi reai
Comprehensive (hospital and medical)					0	0
Medicare Supplement					0	0
3. Dental Only					0	0
4. Vision Only					0	0
5. Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare	27,506,584	59,391,636	1,914,835	38,011,123	29,421,419	35,782,991
7 Title XIX - Medicaid					0	0
8. Other health					0	0
9. Health subtotal (Lines 1 to 8)	27,506,584	59,391,636	1,914,835	38,011,123	29,421,419	35,782,991
10. Healthcare receivables (a)		(186,747)			0	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts		184,952	1,602,453	1,326,508	2,256,513	2,256,515
13. Totals (Lines 9-10+11+12)	28,160,644	59,763,335	3,517,288	39,337,631	31,677,932	38,039,506

<sup>(</sup>a) Excludes \$ ...... loans or advances to providers not yet expensed.

#### **Summary of Significant Accounting Policies**

#### A. Accounting Practices

The accompanying financial statements of Martin's Point Generations Advantage, Inc. (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners ("NAIC") Annual Statement Instructions and in accordance with accounting practices prescribed or permitted by the NAIC Accounting Practices and Procedures Manual, subject to any deviations prescribed or permitted by the Maine Bureau of Insurance (the "Bureau"). There were no deviations from NAIC prescribed or permitted by the Bureau in 2017 or 2018.

A table reconciling income and surplus between the practices prescribed and permitted by the State of Maine and NAIC SAP basis for the current reporting period and the prior year-end is shown below:

		SSAP#	F/S Page	F/S Line #	2018	2017
NET IN	··· <del>-</del>					
(1)	State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	6,345,143	11,490,275
(4)	NAIC SAP (1-2-3=4)		<b>100</b>	100	C 245 142	11 400 275
(.,	(. 20 .)	XXX	XXX	XXX	6,345,143	11,490,275
SURPL	<del></del>					
(5)	State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	63,317,125	56,920,229
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	63,317,125	56,920,229

#### B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

#### C. Accounting Policies

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Premiums paid by subscribers prior to the effective date are recorded on the balance sheet as advance premiums and subsequently credited to income as earned during the coverage period.

In addition, the Company uses the following accounting policies:

- Short-term money market mutual funds are stated at market value and short-term bonds are stated at amortized cost.
- Bonds are stated at amortized cost.
- 2. 3. 4. Common stocks are stated at market value
- The Company does not have any preferred stock.
- 5. The Company does not have any mortgage loans.
- 6. The Company's loan-backed securities are carried at amortized cost. The Company reports the adjustment methodology on an account basis as opposed to each individual security and accounts for all of the securities on a retrospective basis. The Company does not have any investments in subsidiaries, controlled or affiliated companies.
- 7.
- 8. The Company does not have investments in joint ventures, partnerships or limited liability companies
- 9. 10.
- The Company does not have any derivative instruments.

  The Company does not include anticipated investment income in calculating a premium deficiency.
- The Company's reported unpaid claims are based on actuarial estimates. The claims adjustment expenses are estimated at approximately 2% of unpaid claims. Liabilities for unpaid claims and claims adjustment expense are based on assumptions and estimates and while management believes such estimates are reasonable, the ultimate liability may be in excess of or less than the amount provided.
- The Company does not have any capital assets and therefore no capitalization policy.
- The Company records pharmaceutical rebates receivable as a non-admitted asset

#### D. Going Concern

Management has no significant doubts about the Company's ability to continue as a going concern.

## **Accounting Changes and Corrections of Errors**

- Accounting Changes and Correction of Errors: None.
- **Business Combinations and Goodwill: None.** 
  - A. Statutory Purchase Method: None.
  - B. Statutory Merger: None.
  - C. Assumption Reinsurance: None.
  - Impairment Loss: None.
- **Discontinued Operations:** None.

#### 5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

None.

B. Debt Restructuring

None.

C. Reverse Mortgages

None.

#### D. Loan-Backed Securities

- 1. For fixed-rate agency mortgage-backed securities, the Company calculates prepayment speeds utilizing Mortgage Industry Advisory Corporation (MIAC) Mortgage Industry Medians (MIMs). MIMs are derived from a semi-monthly dealer-consensus survey of long-term prepayment projections. For other mortgage-backed, loan-backed, and structured securities, the Company utilizes prepayment assumptions from Moody's Analytics. Moody's applies a flat economic credit model and utilizes a vector of multiple monthly speeds as opposed to a single speed for more robust projections. In instances where Moody's projections are not available, the Company uses data from Reuters, which utilizes the median prepayment speed from contributors' models.
- 2. All securities with a recognized other-than-temporary impairment, disclosed in the aggregate, classified on the basis for the other-than-temporary impairment: The Company has no securities to report per the table below.

	4	0	h .
	1 Amortized Cost Basis	Cthor than Tomporori	ა
		Impairment	
	Other-than-Temporary		Fair Value
			1 - 2
(O) OTTI	impairment	III E033	1 - 2
(2)OTTI recognized 1st Quarter			
a. Intent to sell	0	0	0
Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0	0
c. Total 1st Quarter	0	0	0
OTTI recognized 2nd Quarter			
d. Intent to sell		0	0
e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to			
recover the amortized cost basis	0	0	0
f. Total 2nd Quarter	0	0	0
OTTI recognized 3rd Quarter			
g. Intent to sell	0	0	0
h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0	0
i. Total 3rd Quarter	0	0	0
OTTI recognized 4th Quarter			
j. Intent to sell			0
k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis			0
I. Total 4th Quarter	0	0	0
m. Annual Aggregate Total		0	

(3)						
1	2	3	4	5	6	7
	Book/Adjusted					Date of
	Carrying Value		Recognized	Amortized Cost		Financial
	Amortized Cost	Present Value of	Other-Than-	After Other-Than-		Statement
	Before Current	Projected Cash	Temporary	Temporary	Fair Value at	Where
CUSIP	Period OTTI	Flows	Impairment	Impairment	time of OTTI	Reported
Total	XXX	XXX	0	XXX	XXX	XXX

(4)

a. The aggregate amount of unrealized losses:

1.	Less than 12 Months	266,376
2.	12 Months or Longer	366
b.Th	ne aggregate related fair value of securities with unrealized losses:	
1.	Less than 12 Months	13,519,524
2.	12 Months or Longer	132,307

- (5) The Company considers the following general categories of information in reaching the conclusion that impairments are other-than-temporary:
  - Performance of investments over a twelve month period
  - Volatility in the market
  - Securities ratings

E. Dollar Repurchase Agreements and/or Security Lending Transactions

None

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

None.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

None

H. Repurchase Agreements Transactions Accounted for as a Sale

None

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

None.

J. Real Estate

None.

K. Low-Income Housing Tax Credits

None

L. Restricted Assets

.Restricted Assets (Including Pledged)

estricted Assets (Including Pledged)							
	1	2	3	4	5	6	7
	Total Gross	Total Gross					
	(Admitted &	(Admitted &		Total Current	Total Current	Gross (Admitted	Admitted
	Non-admitted)	Non-admitted)	Increase/	Year	Year Admitted	& Non-admitted)	Restricted to
	Restricted from	Restricted from	(Decrease)	Non-admitted	Restricted	Restricted to	Total Admitted
Restricted Asset Category	Current Year	Prior Year	(1 minus 2)	Restricted	(1 minus 4)	Total Assets (a)	Assets (b)
Subject to contractual obligation for which liability is not shown		0	0		0	0.000	0.000
b. Collateral held under security lending agreements		0	0		0	0.000	0.000
c. Subject to repurchase agreements		0	0		0	0.000	0.000
d. Subject to reverse repurchase agreements		0	0		0	0.000	0.000
e.Subject to dollar repurchase agreements		0	0		0	0.000	0.000
f. Subject to dollar reverse repurchase agreements		0	0		0	0.000	0.000
g.Placed under option contracts		0	0		0	0.000	0.000
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock		0	0		0	0.000	0.000
i.FHLB capital stock		0	0		0	0.000	0.000
j.On deposit with states							
k.On deposit with other regulatory bodies		0	0		0	0.000	0.000
I.Pledged collateral to FHLB (including assets backing funding agreements)		0	0		0	0.000	0.000
m.Pledged as collateral not captured in other categories		0	0		0	0.000	0.000
n. Other restricted assets		0	0		0	0.000	0.000
o.Total Restricted Assets	601,788	601,410	378	0	601,788	0.004	0.004

<sup>(</sup>a) Column 1 divided by Asset Page, Column 1, Line 28

## M. Working Capital Finance Investments

None.

N. Offsetting and Netting of Assets and Liabilities

None

O. Structured Notes

None.

P. 5\* Securities

None

Q. Short Sales

None.

R. Prepayment Penalty and Acceleration Fees

None.

<sup>(</sup>b) Column 5 divided by Asset Page, Column 3, Line 28

<sup>2.</sup> Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate). None.

<sup>3.</sup> Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate). None.

<sup>4.</sup> Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements. None.

#### 6. Joint Ventures, Partnerships and Limited Liability Companies

- A. The Company has no investments in joint ventures, partnerships or limited liability companies.
- B. The Company has no impaired investments in joint ventures, partnerships or limited liability companies.

#### 7. Investment Income

- A. Due and accrued investment income was excluded from surplus on the following basis: None.
- B. The Company did not accrue investment income that was non-admitted at March 31, 2018.
- 8. Derivative Instruments: None.
- 9. Income Taxes: The Company is not subject to Federal Income taxes.

#### 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

#### A. Nature of the relationship involved

The Company is a wholly-owned subsidiary of Martin's Point Health Care, Inc. (MPHC).

#### B&C. Description of the transactions involved, and the dollar amounts of transactions

The Company has an arrangement with MPHC where it will pay MPHC's delivery system for covered services. The payments will consist of fee-for-service payments minus any applicable coinsurance, copayments, deductibles, and contractual adjustments. The Company paid MPHC \$1,038,553 and \$4,084,944 in 2018 and 2017, respectively.

The Company has incentive and risk sharing arrangements with MPHC with respect to members who receive primary care from providers employed by MPHC. Under these arrangements, the Company makes payments to MPHC as follows:

Cost of Care Risk Share Arrangement: The Company and MPHC accepts joint responsibility for managing the cost of care for members who receive primary care through MPHC's delivery system. In recognition of this joint responsibility, the parties agree to participate in a cost of care risk share arrangement. The Company makes payments to MPHC when medical loss ratio results are less than targets. The Company receives payments from MPHC when medical loss ratio results are greater than targets. Under this arrangement, the Company paid MPHC \$0 and \$750,000 for 2018 and 2017, respectively.

Primary Care Payment Model: The Company and MPHC entered into a payment agreement whereby the Company agrees to make payments to MPHC based on performance of specified procedures. The Company paid MPHC \$0 and \$465,320 for 2018 and 2017, respectively.

Population Based Incentives: The Company and MPHC entered into a payment agreement whereby the Company agrees to make payments based on MPHC's performance against pre-determined quality metrics. The Company paid MPHC \$0 and \$165,580 for 2018 and 2017, respectively.

#### D. Amounts Due to or from Related Parties

At March 31, 2018, the Company reported a net of \$1,541,778 due to MPHC for amounts applicable to 2018. Payment to MPHC settled in April 2018.

#### E. Guarantees or Contingencies for Related Parties

Effective November 23, 2015, MPHC, the Guarantor, and the Company, the Primary Obligor, entered into an Unconditional Financial Guaranty with the Maine Bureau of Insurance to secure the Superintendent's conditional approval and licensing of the Primary Obligor to enter into the insurance business in the State of Maine. The Guarantor absolutely and unconditionally guarantees to the Superintendent and the Superintendent's successors and assigns, that if the Primary Obligor at any time fails to maintain capital and surplus at a level no less that the greater of the product of its authorized control level risk-based capital and 3.0 or the minimum requirements for capital and surplus, the Guarantor shall automatically pay such sums or deposits to the Primary Obligor as are necessary to establish and maintain capital and surplus at a level no less that the greater of the product of its authorized control level risk-based capital and 3.0 or the minimum requirements for capital and surplus.

#### F. Management, Service Contracts, Cost Sharing Arrangements

The Company purchases certain marketing, administrative, managerial and other services required by the Company under a Management Services Agreement with MPHC. Management fees charged to the operations for the year ended March 31, 2018 and December 31, 2017 were \$3,147,912 and \$11,978,424, respectively.

- G. Nature of Relationships that Could Affect Operations: None.
- H. Amount Deducted for Investment in Upstream Company: None.
- I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets: None.
- J. Write-down for Impairments of Investments in Subsidiary, Controlled or Affiliated Companies: None.
- K. Investment in Foreign Insurance: None.
- L. Investment in Downstream Noninsurance Holding Company: None.
- M. All SCA Investments: None.
- N. Investment in Insurance SCAs: None.

#### 11. Debt

- A. Debt including Capital Notes: None
- B. FHLB (Federal Home Loan Bank) agreements: None

- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans:
  - A. Defined Benefit Plan: None.
  - B. Investment Policies and Strategies: None.
  - C. Fair Value of Plan Assets: None
  - D. Basis used to determine the long-term rate-of-return: None.
  - E. Defined Contribution Plans: None.
  - F. Multiemployer Plans: None.
  - G. Consolidated/Holding Company Plans: None.
  - H. Postemployment Benefits and Compensated Absences: None.
  - I. Impact of Medicare Modernization Act on Postretirement Benefits: None.
- 13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganization
  - A. The Company has no capital stock.
  - B. The Company has no preferred stock.
  - C. The Company has no dividend restrictions.
  - D. The Company does not pay dividends.
  - E. The portion of the entity's profits that may be paid as ordinary dividends to stockholders is not applicable.
  - F. The Company has no unassigned surplus funds.
  - G. The Company has no advances to surplus.
  - H. The Company has no shares of stock held for special purposes.
  - I. The Company has no special surplus funds, changes in the balances of special purpose funds are not applicable.
  - J. The Company has no surplus adjustments due to cumulative unrealized losses.
  - K. The Company has not issued any surplus notes or debentures or similar obligations.
  - L. The Company had no restatements due to prior quasi-reorganizations.
  - M. The Company has not been involved in any quasi-reorganizations during the past 10 years.
- 14. Liabilities, Contingencies and Assessments
  - A. Contingent Commitments: None.
  - B. Assessments

The Company is subject to a guaranty fund administered by the State of Maine in which it writes business. Guaranty fund assessments are accrued at the time of insolvencies. The Company is not currently aware of any impending solvency issues.

- C. Gain Contingencies: None.
- D. Claims related Extra Contractual Obligations and Bad Faith Losses Stemming from Lawsuits: None.
- E. Joint and Several Liabilities: None.
- F. All Other Contingencies: None.
- 15. Leases
  - A. Lessee Leasing Arrangements: None.
  - B. Lessor Leasing Arrangements: None.
- 16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk:
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
  - A. Transfers of receivables reported as Sales: None.
  - B. Transfer and Servicing of Financial Assets: None.
  - C. Wash Sales: None.
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans
  - A. ASO Plans: None.
  - B. ASC Plans: None.
  - C. Medicare or Similarly Structured Cost Based Reimbursement Contract:

### NOTES TO FINANCIAL STATEMENTS

The Medicare Advantage prescription drug program is referred to as Part D. Settlement amounts in relation to the Part D program are reported as uninsured plans as follows:

The Company reported \$240,645 in accounts receivable related to uninsured plans as of March 31, 2018 and \$240,645 on December 31, 2017. The \$240,645 amount relates to Part D Low Income Cost Sharing.

Low Income Cost Sharing (LICS) - \$240,645

Low-income members have some or the entire member cost share of their benefits paid for by CMS. A prospective payment rate is established during the bid process. With the close of the year, actual expenses are compared to the prospective amounts paid with reconciliation to or from CMS to settle the difference. With the benefit of full Prescription Drug Event (PDE) data through the end of 2017, the prospective payment did not fully cover the CMS LICS obligation. Therefore, an additional payment is expected from CMS. A reserve is applied for the possibility of restatements to 2017 experience prior to the final settlement.

The Company reported a liability of \$1,372,012 for amounts held under uninsured plans as of March 31, 2018 and on December 31, 2017.

Federal Reinsurance - \$1,372,012

Through the Federal reinsurance program, CMS pays 80% of the costs members incur through their Part D benefit beyond the true out-of-pocket (TrOOP) threshold. During the annual bid process, a prospective amount is defined to represent the projected amount Federal Reinsurance will cover. With the close of the year, the prospective payment is reconciled with actual experience. Applicable expenses beyond the prospective reimbursement are accrued as a receivable and amounts below the prospective payable held as a liability. With PDE data through the end of the year, the estimate of this reconciliation is the difference between known events and the bid's prospective value. A reserve is applied for the possibility of restatements to 2017 experience prior to the final settlement.

The Company reported amounts due from pharmaceutical manufacturers in connection with the coverage gap discount program of \$331,662 as accounts receivable related to uninsured plans as of March 31, 2018. These amounts are non-admitted.

The Company reported amounts owed to CMS in connection with the coverage gap discount program of \$883,091 as a liability for amounts held under uninsured plans as of March 31, 2018.

#### 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators: None.

#### 20. Fair Value Measurements

(1)

Fair Value Measurements at Reporting Date					
					Net Asset Value
					(NAV) Included in
Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total	Level 2
a. Assets at fair value					
Perpetual Preferred Stock					
Industrial and Misc					
Parent, Susidiaries and Affiliates					
Total Perpetual Perferred Stock	0	0	0	0	
Bonds					
US Governments		306,060			
Industrial and Misc		23,586,961		23,586,961	
Special Rev./Assess. Oblig		7,306,032		7,306,032	
All Other Governments		891,533		891,533	
Parents, Subsidiaries and Affiliates					
Total Bonds	3,578,775	32,090,586		35,669,361	
Common Stock					
Industrial and Misc	17,689,051			17,689,051	
Other					
Total Common Stock	17,689,051			17,689,051	
<u>Derivative Assets</u>					
Interest Rate Contracts					
Foreign Exchange Contracts					
Credit Contracts					
Commodity Futures Contracts					
Commodity Forward Contracts					
<u>Total Derivatives</u>	0	0	0	0	
Total assets at fair value		32,090,586			

#### 21. Other Items

A. Unusual or Infrequent Items: None.

B. Troubled Debt Restructuring: None.

C. Other Disclosures: None.

D. Business Interruption Insurance Recoveries: None.

E. State Transferable and Non-transferable Tax Credits: None.

F. Subprime Mortgage Related Risk Exposure: None.

G. Retained Assets: None.

H. Insurance – Linked Securities Contracts: None.

#### 22. Events Subsequent:

#### Type I - Recognized Subsequent Events:

Subsequent events have been considered through March 31, 2018 for the statutory statements issued on April 10, 2018.

Type II - Non-recognized Subsequent Events: None.

#### 23. Reinsurance

#### A. Ceded Reinsurance Report

#### Section 1 - General Interrogatories

1. Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?

Yes ( ) No (X)

2. Have any policies issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes () No (X)

#### Section 2 - Ceded Reinsurance Report - Part A

Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel
any reinsurance for reasons other than for nonpayment of premium or other similar credit?

Yes ( ) No (X)

2. Does the Company have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

### Section 3 - Ceded Reinsurance Report - Part B

1. What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement?

None

2. Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?

Yes ( ) No (X)

- B. Uncollectible Reinsurance: None.
- C. Commutation of Ceded Reinsurance: None.
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation: None.

### 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. Method used to estimate accrued retrospective premium advances. None.
- B. Disclosure of accrued retrospective premiums. None.
- C. **Disclosure of the amount of net premiums written.** None.
- D. Disclosure of the amounts for medical loss ratio rebates required. None.
- E. Risk-sharing provisions of the Affordable Care Act. None.

### NOTES TO FINANCIAL STATEMENTS

#### 25. Change in Incurred Claims and Claims Adjustment Expenses

- A. Reserves as of December 31, 2017 were \$36,771,538. As of March 31, 2017, \$28,442,232 has been paid for incurred claims and claim adjustment expenses attributable to insured events of the prior year. Reserves remaining for prior years are \$1,967,735 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, after taking into account that the Company had \$4,024,714 of redundancy at December 31, 2017, there has been \$2,336,857 favorable prior-year development between December 31, 2017 and March 31, 2018. The favorable development is generally the result of ongoing analysis of recent loss development trends. Estimates are increased or decreased as additional information becomes known regarding individual claims.
- B. Significant changes in methodologies and assumptions used in calculating the liability: None.
- 26. Intercompany Pooling Arrangements: None.
- 27. Structured Settlements: None.
- 28. Health Care Receivables
  - A. Pharmaceutical Rebate Receivables: The Company records Pharmaceutical Rebates Receivables as non-admitted asset.
  - B. Risk Sharing Receivables: The Company participates in risk sharing arrangements with area health care provider systems. In determining appropriate receivables or liabilities for these arrangements, the valuation process reflects actual experience during the performance period for each contract. Where actual experience is not yet complete, experienced actuarial modeling and judgement, consistent with the Company's methods employed for IBNP and Accrued Retrospective Premiums, are applied to reflect the most likely performance of each risk sharing contract. A reserve is applied to any estimated risk sharing receivable as provision for actual experience varying from any experience requiring estimation.

Estimated balance of risk sharing receivables as reported on the prior year financial statements for evaluation periods ending in the current year: \$345,461

Estimated balance of risk sharing receivables as reported on the current year financial statements for evaluation periods ending in the current year and the following year: None.

Risk sharing receivables billed as determined after the annual evaluation period: None.

Risk sharing receivables not yet billed: \$345,461

Amounts received from providers as payments under risk sharing contracts: None.

29. Participating Policies: None.

#### 30. Premium Deficiency Reserves:

1. Liability carried for premium deficiency reserves \$0

2. Date of the most recent evaluation of this liability 4/27/2018

3. Was anticipated investment income utilized in the calculation Yes ( ) No ( X )

31. Anticipated Salvage and Subrogation: The Company does not take into account an estimate of anticipated salvage or subrogation in its determination of its liability for unpaid claims.

## **GENERAL INTERROGATORIES**

## PART 1 - COMMON INTERROGATORIES

### **GENERAL**

1.1	Did the reporting entity experience any material transactions requiring the Domicile, as required by the Model Act?	e filing of Disclosure of Material Trans	actions with the State of	Y	es [	. ]	No	[ X ]	
1.2	If yes, has the report been filed with the domiciliary state?			У	es [	]	No	[ ]	
2.1	Has any change been made during the year of this statement in the chart reporting entity?			. У	es [	. ]	No	[ X ]	
2.2	If yes, date of change:								
3.1	Is the reporting entity a member of an Insurance Holding Company System is an insurer?  If yes, complete Schedule Y, Parts 1 and 1A.				es [	Х ]	No '	[ ]	
3.2	Have there been any substantial changes in the organizational chart since	e the prior quarter end?		У	es [	]	No	[ X ]	
3.3	If the response to 3.2 is yes, provide a brief description of those changes.								
3.4	Is the reporting entity publicly traded or a member of a publicly traded gro	oup?		У	es [	]	No	[ X ]	
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code iss	sued by the SEC for the entity/group.							
4.1	Has the reporting entity been a party to a merger or consolidation during	the period covered by this statement	?	Y	es [	]	No	[ X ]	
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of ceased to exist as a result of the merger or consolidation.	domicile (use two letter state abbrevi	ation) for any entity that has						
	1 Name of Entity	2 NAIC Company Code	3 State of Domicile						
5.	If the reporting entity is subject to a management agreement, including th in-fact, or similar agreement, have there been any significant changes re If yes, attach an explanation.	nird-party administrator(s), managing egarding the terms of the agreement	general agent(s), attorney- or principals involved? Yes	[ ]	No	) [ X	] N	I/A [	
6.1	State as of what date the latest financial examination of the reporting enti	ity was made or is being made				12/31	/2014	1	
6.2	State the as of date that the latest financial examination report became a date should be the date of the examined balance sheet and not the date			<u></u>		12/31	/2014	4	
6.3	State as of what date the latest financial examination report became avaithe reporting entity. This is the release date or completion date of the exdate).	xamination report and not the date of	the examination (balance sheet	sheet					
6.4 6.5	By what department or departments? Bureau of Insurance of the State of Maine Have all financial statement adjustments within the latest financial examir statement filed with Departments?	nation report been accounted for in a	subsequent financial	[ ]	No	) [	] N	I/A [	Х
6.6	Have all of the recommendations within the latest financial examination re	eport been complied with?	Yes	[ X ]	No	] (	] N	I/A [	
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrevoked by any governmental entity during the reporting period?	istrations (including corporate registra	tion, if applicable) suspended o	r Y	es [	. ]	No	[ X ]	
7.2	If yes, give full information:								
8.1	Is the company a subsidiary of a bank holding company regulated by the		Ү	es [	]	No	[ X ]		
8.2	If response to 8.1 is yes, please identify the name of the bank holding cor								
8.3	Is the company affiliated with one or more banks, thrifts or securities firms	s?		У	es [	]	No	[ X ]	
8.4	If response to 8.3 is yes, please provide below the names and location (ci regulatory services agency [i.e. the Federal Reserve Board (FRB), the C Insurance Corporation (FDIC) and the Securities Exchange Commission	Office of the Comptroller of the Currer	icy (OCC), the Federal Deposit						
	1 Affiliate Name	2 Location (City, State)		5 DIC	6 SE				

## **GENERAL INTERROGATORIES**

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controll similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	ersonal and professional	Yes [ X ] No [ ]
9.11	If the response to 9.1 is No, please explain:		
9.2 9.21	Has the code of ethics for senior managers been amended?		Yes [ ] No [ X ]
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?		Yes [ ] No [ X ]
	FINANCIAL		
10.1 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement from parent included in the Page 2 amount:		
	INVESTMENT		
11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or ouse by another person? (Exclude securities under securities lending agreements.)		Yes [ ] No [ X ]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		
13.	Amount of real estate and mortgages held in short-term investments:		
14.1 14.2	Does the reporting entity have any investments in parent, subsidiaries and affiliates?		Yes [ ] No [ X ]
		1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
	Bonds		\$
	Preferred Stock		\$
	Common Stock		\$
	Short-Term Investments		\$ \$
	Mortgage Loans on Real Estate		
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)		\$0
	Total Investment in Parent included in Lines 14.21 to 14.26 above		\$ \$
15.1 15.2	Has the reporting entity entered into any hedging transactions reported on Schedule DB?		

## **GENERAL INTERROGATORIES**

16.	For the reporting entity's secur	the reporting entity's security lending program, state the amount of the following as of the current statement date:										
		value of reinvested collateral assets repo										
		ok adjusted/carrying value of reinvested co										
	16.3 Total pay	yable for securities lending reported on the	liability page			\$						
17. 17.1	offices, vaults or safety depos custodial agreement with a que Outsourcing of Critical Functi	- Part 3 - Special Deposits, real estate, m sit boxes, were all stocks, bonds and other ualified bank or trust company in accordar ons, Custodial or Safekeeping Agreement y with the requirements of the NAIC Finance	securities, owned the nce with Section 1, III s of the NAIC Finance	oughout the currer - General Examina al Condition Exam	nt year held pursuant to a ation Considerations, F. iners Handbook?		[ X ] No [ ]					
		1		2								
	IIS Pank MA	ne of Custodian(s)	50 S 16th St 20t	Custodian	Address							
	OS DATIK IVA		Philadelphia, PA	19102								
17.2	For all agreements that do not location and a complete expla	comply with the requirements of the NAIC anation:	Financial Condition	Examiners Handbo	ook, provide the name,							
	1 Name(s)	2 Location(s)		Complete	3 Explanation(s)							
17.3 17.4	Have there been any changes. If yes, give full information rela	, including name changes, in the custodiar ting thereto:	n(s) identified in 17.1	during the current of	quarter?	Yes	] No [ X ]					
	1	2	3		4							
	Old Custodian	New Custodian	Date of Ch	ange	Reason							
	such. ["that have access to Nam Asset Allocation and Manager	on behalf of the reporting entity. For assets to the investment accounts"; "handle sec 1 ne of Firm or Individual nent Co, LLC	2 Affiliation Udo any firms/individua	lls unaffiliated with	the reporting entity (i.e.		[X] No []					
	17.5098 For firms/individuals utotal assets under ma	unaffiliated with the reporting entity (i.e. dec unagement aggregate to more than 50% of	signated with a "U") li f the reporting entity's	sted in the table fo assets?	r Question 17.5, does the	Yes	[ ] No [ X ]					
17.6	For those firms or individuals lable below.	isted in the table for 17.5 with an affiliation	code of "A" (affiliated	l) or "U" (unaffiliate	ed), provide the information fo	r the						
	1	2		3	4		5 Investment Management					
	Central Registration	Name of Firm or ladicide of	Legal Entity	Identifier (LEI)	Dogistared With		Agreement					
	Depository Number 109875	Name of Firm or Individual Asset Allocation and Management Co, LLC		SE	Registered With		(IMA) Filed DS					
		Troote Arroactor and management 50, EE										
		s of the Purposes and Procedures Manual										
19.	a. Documentation necession     b. Issuer or obligor is curred     c. The insurer has an actumental actume	ities, the reporting entity is certifying the fo ary to permit a full credit analysis of the se ent on all contracted interest and principal ial expectation of ultimate payment of all co ssignated 5*GI securities?	curity does not exist. payments. ontracted interest and	l principal.	·	Yes	[ ] No[X]					

## **GENERAL INTERROGATORIES**

## PART 2 - HEALTH

### 1. Operating Percentages:

	1.1 A&H loss percent	 		87.2
	1.2 A&H cost containment percent	 		1.6
	1.3 A&H expense percent excluding cost containment expenses	 		7.2
2.1	Do you act as a custodian for health savings accounts?	 Yes [ ]	No [ X	]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	\$ 		
2.3	Do you act as an administrator for health savings accounts?	 Yes [ ]	No [ X	]
2.4	If yes, please provide the balance of the funds administered as of the reporting date	\$ 		
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	 Yes [ X ]	No [	]
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes [ ]	No ſ	1

## **SCHEDULE S - CEDED REINSURANCE**

Showing All New Reinsurance Treaties - Current Year to Date

Showing All New Reinsurance Treaties - Current Year to Date  1 2 3 4 5 6 7 8											
1	2	3 4	5	6	7	8 Certified	9 Effective Date of				
NAIC Company Code	ID	Effective	Domiciliary	Type of Reinsurance		Reinsurer Rating	Certified Reinsurer				
Code	Number	Date Name of Reinsurer	Jurisdiction	Ceded	Type of Reinsurer	(1 through 6)	Rating				
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## **SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

1			Current Ye	ear to Date - A	llocated by S					1
		1	2	3	4	Direct Bus 5	iness Only 6	7	8	9
		Active	Accident and			Federal Employees Health Benefits	Life and Annuity Premiums &	Property/	Total	
	States, etc.	Status (a)	Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Program Premiums	Other Considerations	Casualty Premiums	Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama AL	N							0	
2.	Alaska AK	N							0	
3. 4.	Arizona AZ Arkansas AR	NN.							0	
5.	California CA	NN.							0	
6.	Colorado CO	N.							0	
	Connecticut CT	N	<u> </u>						0	
8. 9.	Delaware DE District of Columbia . DC	NN							0	
10.	Florida FL	NN	-						0	
	Georgia GA	N							0	
12.	Hawaii HI	N							0	
13.	Idaho ID	N							0	
14. 15.	Illinois IL Indiana IN	NN							0	
16.	lowa IA	N							0	
17.	Kansas KS	N							0	
18.	Kentucky KY	N							0	
19. 20.	Louisiana LA Maine ME	NL		106,088,096					06,088,096	
	Maryland MD	LN		100,000,090					06,088,096	
22.	Massachusetts MA	N							0	
23.	Michigan MI	N							0	
24.	Minnesota MN	N	-						0	
25. 26.	Mississippi MS Missouri MO	NN							0 n	
27.	Montana MT	N.							0	
	Nebraska NE	N							0	
29.	Nevada NV	N							0	
30. 31.	New Hampshire NH	LN	<del> </del>	2,277,307					2,277,307	
31. 32.	New Jersey NJ New Mexico NM	NNN.	†						0	l
	New York NY	N							0	
	North Carolina NC	N							0	
35.	North Dakota ND	N.							0	
36. 37.	Ohio OH Oklahoma OK	NN.							0	
38.	Oregon OR	N.							0	
39.	Pennsylvania PA	N							0	
40.	Rhode Island RI	N	<b>_</b>						0	
41. 42.	South Carolina SC South Dakota SD	NN.							0	
42. 43.	Tennessee TN	NN.							0	
44.	Texas TX	N							0	
45.	Utah UT	N							0	
46.	Vermont VT	N							0	
	Virginia VA Washington WA	NNN.	<del> </del>	<b></b>					0	
	West Virginia WV	N							0	
50.	Wisconsin WI	N							0	
	Wyoming WY	N.							0	
52. 53.	American Samoa AS Guam GU	NN.							0 n	
54.	Puerto Rico PR	N.							0	
	U.S. Virgin Islands VI	N							0	
56.	Northern Mariana Islands MP	N							0	
57.	Canada CAN								0	
58.	Aggregate Other			_	-			-	-	
59.	Aliens OT Subtotal	XXX	0	0	0 0	0	0 0	0 0	08,365,403	0 n
60.	Reporting Entity Contributions for Employe Benefit Plans			100,000,400		ν	u	y	00,303,403	
61.	Totals (Direct Business)	XXX	0	108,365,403	0	0	0	0	108,365,403	0
	DETAILS OF WRITE-INS		1	, ,				,	, , , , , , , , ,	
58001. 58002.										
58998.	Summary of remaining									
58999.	write-ins for Line 58 from overflow page Totals (Lines 58001 throug	XXX	0	0	0	0	0	0	0	0
	58003 plus 58998)(Line 58 above) e Status Counts:		0	0	0	0	0	0	0	0
رس ، روزر روز L - Lic	censed or Chartered - Licen	sed Insurance o	carrier or domicile	d RRG		2 R - Rogio	stered - Non-dom	nicited PPCs	0	

L-	Licensed or Chartered - Licensed Insurance carrier or domiciled RRG	R - Registered - Non-domiciled RRGs
Ε-	Eligible - Reporting entities eligible or approved to write surplus lines in the state0	Q - Qualified - Qualified or accredited reinsurer.
N -	None of the above - Not allowed to write business in the state	

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART

Martin's Point Health Care, Inc.
FEIN #01-0353275
State of Maine Incorporated
04/13/1971

Martin's Point Generations Advantage, Inc.
Wholly Owned Subsidiary
FEIN # 47-4682941
NAIC Code #15850
State of Maine Incorporated
7/31/2015

## **SCHEDULE Y**

## PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Committee			Deletien						
						Name of Securities		l	Relation-		Board,	Owner-		SCA	
						Exchange		Domi-			Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary			Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Group Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
			01-0353275				Martin's Point Health Care, Inc.	ME	UDP		Board of Directors.		Martin's Point Health Care, Inc.	N	
0000		15850	47-4682941				Martin's Point Generations Advantage, Inc	ME	DS	Martin's Point Health Care, Inc.	Board of Directors		Martin's Point Health Care, Inc.	N	
							martin o rome acrono navantago, mo			The state of the s	504.4 0. 50010.0				
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Asterisk	Explanation

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		 Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	 NO
	Explanation:	
1.		
1.	Bar Code:  Medicare Part D Coverage Supplement [Document Identifier 365]	

## **OVERFLOW PAGE FOR WRITE-INS**

## **SCHEDULE A - VERIFICATION**

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted yill vayill va		
7.	Deduct current year's other than temporary impairent relative zed		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

## **SCHEDULE B - VERIFICATION**

Mortgage Loans

	wortgage Loans		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	-	
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in the state of the land ammitment the state of the		
9.	Total foreign exchange change in book value/recalled in the length cluding and use the state of		
10.	Deduct current year's other than temporary impalent red zed zedzed		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

## **SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	Other Long-Term invested Assets		
	-	1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

## **SCHEDULE D - VERIFICATION**

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	53, 144, 964	48,281,585
2.	Cost of bonds and stocks acquired		27, 150, 381
3.	Accrual of discount	7,766	31,031
4.	Unrealized valuation increase (decrease)	(99,374)	2,984,738
5.	Total gain (loss) on disposals	(18,462)	(110,029)
6.	Deduct consideration for bonds and stocks disposed of	2,625,629	25, 107, 367
7.	Deduct amortization of premium	17,305	
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	53,400,631	53, 144, 964
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	53,400,631	53, 144, 964

## **SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

Burning the	1	all Bonds and Prefe	3	Designation	5	6	7	8
	Book/Adjusted	2	3	7	Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Carrying Value	Carrying Value	Carrying Value	Carrying Value
NAIO D. ' I'	Beginning	During	During	During	End of	End of	End of	December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
BONDO								
1. NAIC 1 (a)	31,097,446	4,589,338	4,824,514	671,094	31,533,364	0	0	31,097,446
2. NAIC 2 (a)	4,939,390	616,563	138,546	(122,911)	5,294,496	0	0	4,939,390
3. NAIC 3 (a)	0	0	0	112,540	112,540	0	0	
4. NAIC 4 (a)	0				0			
5. NAIC 5 (a)	0				0			
	0				0			
6. NAIC 6 (a)		F 00F 004	4 000 000	000 700		0		00 000 000
7. Total Bonds	36,036,836	5,205,901	4,963,060	660,723	36,940,399	0	0	36,036,836
PREFERRED STOCK								
8. NAIC 1	0				0			
9. NAIC 2	0				0			
10. NAIC 3	0				0			
11. NAIC 4	0				0			
12. NAIC 5	0				0			
13. NAIC 6	0				0			
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	36,036,836	5,205,901	4,963,060	660,723	36,940,399	0	0	36,036,836

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$ \_\_\_\_\_\_ 614,410 ; NAIC 2 \$ \_\_\_\_\_\_ 0 ; NAIC 3 \$ \_\_\_\_\_ 0 NAIC 4 \$ \_\_\_\_\_ 0 ; NAIC 5 \$ \_\_\_\_\_ 0 ; NAIC 6 \$ \_\_\_\_\_ 0

## **SCHEDULE DA - PART 1**

	SI	hort-Term Investments			
	1Book/Adjus	2	3	4 Interest Collected	5 Paid for Accrued Interest
	Ca ng Va	Palue	ost	Year-to-Date	Year-to-Date
9199999 Totals		$\Lambda$			

## **SCHEDULE DA - VERIFICATION**

Short-Term Investments

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	1,550,540
2.	Cost of short-term investments acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		1,550,540
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	0	0

# Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards NONE

Schedule DB - Part B - Verification - Futures Contracts  ${f N}$   ${f O}$   ${f N}$   ${f E}$ 

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open NONE

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

## **SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

	(Cash Equivalents)	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	678 , 188	
2.	Cost of cash equivalents acquired	2,255,191	19, 149, 494
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	2,318,969	18,471,306
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	614,410	678 , 188
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	614,410	678, 188

# Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **NONE** 

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made **NONE** 

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid  $\bf N$   $\bf O$   $\bf N$   $\bf E$ 

## **SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

			OHOW All	Long-Term Bonds and Stock Acquired During the Current Quarter					
1	2	3	4	5	6	7	8	9	10
									NAIC Desig-
									nation or
					Number of			Paid for Accrued	Market
CUSIP			Date		Shares of			Interest and	Indicator
Identification	Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	(a)
	FH 051334 - RMBS	rorcigir	01/26/2018	BAIRD, ROBERT W., & COMPANY IN	Otock	405.695	390.092	1.257	
	FN AS3867 - RIMBS		03/23/2018	INTL FCStone Financial Inc.				277	
	FN CA1255 - RMBS		02/06/2018	BAIRD, ROBERT W., & COMPANY IN		311.391	300.000	400	1
	PORT AUTH N Y & N J		01/24/2018	MERRILL LYNCH, PIERCE, FENNER & SMITH				0	1FE
3199999, Subto	otal - Bonds - U.S. Special Revenues					890.780	861.129	1.934	XXX
	ANALOG DEVICES INC		03/08/2018	BAIRD, ROBERT W., & COMPANY IN		148 . 140	150.000	1.263	
126802-DC-8	CABMT 151 A1 - ABS		02/14/2018	BNP SECURITIES MLPFS INC FIXED INCOME		297.961	300.000		1FE
254683-CD-5	DCENT 181 A - ABS	299,989	300,000	0	1FE.				
29250R-AW-6	ENBRIDGE ENERGY PARTNERS LP	169,709	150,000	2,595	2FE				
37045X-BT-2	GENERAL MOTORS FINANCIAL COMPANY INC		03/27/2018	BNP SECURITIES		149,028	150,000	1,305	2FE
	JDOT 2018 A3 - ABS		02/21/2018	RBC CAPITAL MARKETS, LLC		224,984	225,000		1FE
	KROGER CO		01/11/2018	CREDIT SUISSE SECURITIES		149,687	150,000	2,652	
61744Y-AP-3	MORGAN STANLEY		01/24/2018	MORGAN STANLEY & CO. LLC		150 , 788	150,000		1FE
	RIO TINTO FINANCE (USA) LTD	C	02/01/2018	RBC CAPITAL MARKETS, LLC		61,810	60,000		1FE
	VIRGINIA ELECTRIC AND POWER CO		03/20/2018	GOLDMAN, SACHS & CO.		145,244	150,000	879	1FE
	WOART 17A A3 - ABS		03/20/2018	RBC CAPITAL MARKETS, LLC		262,592	266,000		1FE
	otal - Bonds - Industrial and Miscellaneous (Unaffiliated)					2,059,930	2,051,000	9,156	
8399997. Total	- Bonds - Part 3					2,950,710	2,912,129	11,091	
8399998. Total	- Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total	- Bonds					2,950,710	2,912,129	11,091	XXX
8999997. Total	- Preferred Stocks - Part 3					0	XXX	0	XXX
8999998. Total	- Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total	- Preferred Stocks					0	XXX	0	XXX
921909-81-8	VANGUARD TOT I STK:ADM		03/26/2018	U.S. Bank	400.338	11.874		0	U
	VANGUARD EM ST IDX:ADM		03/26/2018	U.S. Bank	118.307	4,534		0	U
	VANGUARD TSM IDX; INST		03/22/2018	U.S. Bank	612.359	41,555		0	L
9299999. Subto	otal - Common Stocks - Mutual Funds					57,962	XXX	0	XXX
9799997. Total	- Common Stocks - Part 3					57,962	XXX	0	XXX
9799998. Total	- Common Stocks - Part 5					XXX	XXX	XXX	XXX
9799999. Total	- Common Stocks					57,962	XXX	0	XXX
	- Preferred and Common Stocks					57,962	XXX	0	XXX
9999999 - Tota	ls					3,008,672	XXX	11,091	XXX

## **SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

	Show All Long-Term Bonds and Stock Sold, Redeemed or C																				
1	2	3	4	5	6	7	8	9	10	Ch	nange In Boo	ok/Adjusted	Carrying Valu	ue	16	17	18	19	20	21	22
										11	12	13	14	15							
													Total	Total							NAIC
												Current	Change in	Foreign							Desig-
															Book/				Bond		nation
									Dulan Vaan			Year's		Exchange		F				04-4	
									Prior Year		Current	Other Than		Change in	Adjusted	Foreign			Interest/	Stated	or
									Book/	Unrealized		Temporary		Book	Carrying	Exchange			Stock	Con-	Market
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment	t Value	/Adjusted	Value at	Gain	Gain	Total Gain	Dividends	tractual	ln-
ldent-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	dicator
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	DuringYear	Date	(a)
36230M-EP-8	GN 752842 - RMBS		03/01/2018	Paydown		8,670	8,670	9, 168	9,078	0	(3)	0	(3)	0	9,074	0	(404)	(404)	29	.07/15/2025	1
				J.P. MORGAN SECURITIES		·	, i														
912828-WD-8	UNITED STATES TREASURY		03/28/2018	INC		99,578	100,000	100,620	100, 192	0	(56)	0	(56)	0	100 , 137	0	(559)	(559)	515	_10/31/2018	. 1
0599999. S	Subtotal - Bonds - U.S. Governments					108,248	108,670	109,789	109,270	0	(59)	0	(59)	0	109,211	0	(963)	(963)	543	XXX	XXX
3128M7-WL-6	FH G05751 - RMBS		03/01/2018 _	Paydown		10,407	10,407	11,328	11,322	0	(2)	0	(2)	0	11,321	0	(913)	(913)	42	_12/01/2039 _	. 1
3128MF-AN-8	FH G16113 - RMBS		03/01/2018	Paydown		10,079	10,079	10,383	10,366	0	(2)	0	(2)	0	10,364	0	(285)	(285)	23	.03/01/2032	. 1
	FH G18609 - RMBS		03/01/2018	Paydown		6,774	6,774	6,581	6,590	0	1	0	1	0	6,592	0	183	183	11	_08/01/2031	. 1
	FH G18663 - RMBS		03/01/2018	Paydown		6,878	6,878	7,097	7,091	0	(2)	0	(2)	0	7,089	0	(211)	(211)	18	_10/01/2032	.[1
	FH V82515 - RMBS		03/01/2018	Paydown		9,257	9,257	9,483	9,481	0	(1)	ļ	(1)	0	9,480	0	(223)	(223)	29	_06/01/2046	
	FH Q51334 - RMBS		03/01/2018	Paydown		4,346	4,346	4,520	0	ō	ļ0	Fō	0	0	4,520	ō	(173)	(173)	8	.10/01/2047	-[]
	FH Q52093 - RMBS		03/01/2018	Paydown		5,724	5,724	5,914	5,912	0	(2)	J0	(2)	0	5,910	0	(186)	(186)	19	.11/01/2047	
3136AV-6R-5 _3137BT-NK-3	FNGT 17T1 A - CMO/RMBS		03/01/2018	Paydown		36 9.938	36 9.938	36 10,298	36	0	(3)		(3)	٥	36	0	(326)	(326)		_06/25/2027 _01/15/2042	1
	FWLS 17SC02 2A1 - CM0		03/01/2018	Paydown		6,261	6,261	6.395	6.399	۸	n	n	0	۰	6.399		(138)	(326)		.05/25/2047	1
	FN AJ6086 - RMBS		03/01/2018	Paydown		15,631	15,631	16,142	16.114	0	(4)	0	(4)	٥	16.111	0	(479)	(479)	39	_12/01/2026	1
	FN AL0240 - RMBS		03/01/2018	Paydown		7,055	7,055	7,511	7,514	0	(1)	0	(1)	0	7,513	0	(459)	(459)		_04/01/2041	1
	FN AS3867 - RMBS		03/01/2018	Paydown		9, 189	9, 189	9,768	9,765	0	(1)	0	(1)	0	9,765	0	(575)	(575)	31	_11/01/2044	1
3138WD-KE-0	FN AS3892 - RMBS		03/01/2018	Paydown		6,501	6,501	6,806	6,805	0	0	0	0	0	6,805	0	(304)	(304)	17	.11/01/2044	. 1
	FN AV2359 - RMBS		03/01/2018	Paydown		12,369	12,369	13,072	13,084	0	(1)	0	(1)	0	13,084	0	(715)	(715)	32	.01/01/2044	. 1
	FN BE9567 - RMBS		03/01/2018	Paydown		6,505	6,505	6,680	6,672	0	(1)	0	(1)	0	6,671	0	(165)	(165)	21	_04/01/2047	. 1
	FN CA1255 - RMBS		03/01/2018	Paydown		1,057	1,057	1,098	0	0	0	0	0	0	1,097	0	(40)	(40)	0	_02/01/2048	. 1
	FN 890383 - RMBS		03/01/2018	Paydown		2, 182	2, 182	2,309	2,310	0	0	0	0	0	2,310	0	(128)	(128)	5	.01/01/2042	. 1
	LOUISIANA LOC GOVT ENVIRONMENTAL FACS &		02/01/2018	Paydown		10,907	10,907	11,010	10,968	0	(14)	0	(14)	0	10,955	0	(47)	(47)	0	_08/01/2028	1FE
	Subtotal - Bonds - U.S. Special Rever			I	1	141,100	141,100	146,431	140,700	0	(33)	0	(***)	0	146,285	0	(5, 185)	(5, 185)	359	XXX	XXX
	AMCAR 154 A3 - ABS		03/08/2018			62,772	62,772	62,919	62,830	0	(6)	0	(6)	0	62,824	0	(52)	(52)	101	.07/08/2020	1FE
	AEPWV 1113 A1 - ABS		02/01/2018 01/22/2018	Paydown		21,703 650,000	21,703 650,000	21,589 659,829	21,598	0	(224)	0	2	0	21,599 650,000	0	104	104	0 L	_02/01/2024	1FE
	HAROT 162 A3 - ABS		03/15/2018	Maturity @ 100.00 Paydown		63,392			650,224 63,317		(224)		(224)	٥	63,321		71	71		_01/22/2018 _04/15/2020	
430 14U-NU-Z	MANUT 102 AS - ADS		או 10/20 ולע	RBC CAPITAL MARKETS, LLC	r	03,392													//	4/ 13/2020	. IFE
548661-DP-9	LOWE'S COMPANIES INC		01/19/2018	TIDO ON TIME MANIELTO, EEC	~	293,910	300,000	299,538	299,564	0	2	0	2	0	299,567	0	(5,657)	(5,657)	2,067	_05/03/2027	1FE
	NAROT 15B A3 - ABS		03/15/2018	Pavdown		48.156	48, 156	48.120	48.139	0	1	0	1	0	48 . 140	0	16	16		03/16/2020	1FE
	AEPOH 1308 A2 - ABS		01/01/2018	Paydown		57,907	57,907	58,215	58,095	0	0	0	0	0	58,095	0	(188)	(188)		.07/01/2020	1FE
	SEMT 124 A2 - CMO/RMBS		03/01/2018	Paydown		9,265	9,265	9,276	9,276	0	0	0	0	0	9,276	0	(12)	(12)		.09/25/2042	. 1FE
81745F-AA-4	SEMT 123 A1 - CMO/RMBS		03/01/2018	Paydown		7,656	7,656	7,800	7,799	0	(1)	0	(1)	0	7,798	0	(142)	(142)	16	_07/25/2042	1FE
				BNY/SUNTRUST CAPITAL						_		_				_					
84/56N-AF-6	SPECTRA ENERGY PARTNERS LP		01/30/2018	MARKETS		138,715	140,000	138,355	138,531	0	15	ļ0	15	0	138,546	0	169	169	1,851	.03/15/2025	2FE
89236T-CU-7	TOYOTA MOTOR CREDIT CORP		03/12/2018	MARKETAXESS CORPORATION		650,634	656,000	659,818	657,523	^	(000)		(200)	^	657,260	_	(6 606)	(6,600)	6,350	_02/19/2019	1FE
	WAL-MART STORES INC		02/15/2018 02/15/2018	Maturity @ 100.00						0	(262)		(262)	٥	363,000	0	(6,626)	(6,626)		_02/19/2019 _02/15/2018	
	WFCM 17RC1 A1 - CMBS		03/01/2018	Pavdown		9, 172	9, 172	9, 172	9.170		(2,010)	0	(2,010)	u ^	9.170	0	· · · · · · · · · · · · · · · ·	2	18	_01/16/2060	
	Subtotal - Bonds - Industrial and Misce				·	2,376,281	2,389,023	2,442,218	2,391,075	0	(2,479)	0	(2,479)	۸	2,388,596	0	(12,315)	(12,315)	28,805	XXX	XXX
		elialieuu	is (Ullallill	aleu)								0		0		0					
	Total - Bonds - Part 4					2,625,629	2,638,793	2,698,437	2,641,045	0	(2,571)	•	(=,0.1)	0	2,644,092	·	(18,462)	(18,462)	29,708	XXX	XXX
	Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Total - Bonds					2,625,629	2,638,793	2,698,437	2,641,045	0	(2,571)	0	(=, 0)	0	2,644,092	0	(18,462)	(18,462)	29,708	XXX	XXX
8999997. T	Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
8999998. T	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Total - Preferred Stocks					n	XXX	0	0	0	n	0	1		0	0	0	0	n	XXX	XXX
	Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	v	0	0	0	0	0	0	XXX	XXX
						VVV		-		·		Ü	Ü	VVV			Ů		VVV		
	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Total - Common Stocks					0	XXX	0	0	0	0	0	, ,		0	0	0	0	0	XXX	XXX
	Total - Preferred and Common Stocks	3				0	XXX	0	0	0		0		0	0	0	0	0	0	XXX	XXX
9999999 -	Totals				·	2,625,629	XXX	2,698,437	2,641,045	0	(2,571)	0	(2,571)	0	2,644,092	0	(18,462)	(18,462)	29,708	XXX	XXX

<sup>(</sup>a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues.....

# Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE** 

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

## **SCHEDULE E - PART 1 - CASH**

1	2	3	4	5	Book Balance at End of Each Month			
					During Current Quarter			
			Amount of	Amount of	6	7	8	
			Interest Received					
		Rate of		at Current				
Depository	Code	ode Interest Quarter Statement Date First Month Second Month Third Mont		Third Month	*			
TD Bank, National Association								
Portland, ME					15,321,011	16,063,755	53,455,884	XXX
TD Bank, National Association								
Portland, ME					(6.067.701)	(4,640,215)	(8.344.153)	XXX
Androscoggin Bank Lewiston, ME		0.008	7.668		5.736.405	5,709,122	5.667.670	XXX
0199998. Deposits in depositories that do not			, , , , , , , , , , , , , , , , , , , ,					
exceed the allowable limit in any one depository (See								
instructions) - Open Depositories	XXX	XXX						XXX
0199999. Totals - Open Depositories	XXX	XXX	7,668	0	14,989,715	17,132,662	50,779,401	XXX
0299998. Deposits in depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	7,668	0	14,989,715	17,132,662	50,779,401	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
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0599999. Total - Cash	XXX	XXX	7,668	0	14,989,715	17, 132, 662	50,779,401	XXX

## **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Char	Investments	$\bigcap$	Lad of	Currant	0

-			vned End of Curren		•	7	0	•
1	2	3	4	5	6	Pools/Adjusted	Amount of Interest	Amount Received
QUOID	<b>5</b>	0 1	D . A	B . (I		Book/Adjusted	Amount of Interest	
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
	U.S. Government Bonds					0	0	· ·
	All Other Government Bonds					0	0	·
	U.S. States, Territories and Possessions Bonds					0	0	v
2499999. Total	U.S. Political Subdivisions Bonds					0	0	,
	U.S. Special Revenues Bonds					0	0	0
	Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
4899999. Total	Hybrid Securities					0	0	0
	Parent, Subsidiaries and Affiliates Bonds					0	0	0
	tal - SVO Identified Funds					0	0	0
7799999. Total	Issuer Obligations					0	0	0
7899999. Total	Residential Mortgage-Backed Securities					0	0	0
7999999. Total	- Commercial Mortgage-Backed Securities					0	0	0
	Other Loan-Backed and Structured Securities					0	0	0
8199999. Total	SVO Identified Funds					0	0	0
8399999. Total	Bonds					0	0	0
	FIRST AMER:TRES OBLG;Z				XXX		119	290
	-IRST_AMER:GVT_OBLG;Z				XXX	12,622	270	26
	TD ASSET MGMT:INST TR;CM				XXX	501,428	221	273
8599999. Subto	tal - Exempt Money Market Mutual Funds - as Identified by the SVO					614,410	610	589
								-
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8899999 - Tota	Cash Equivalents			h	•••••	614.410	610	589
5555555 Tota	Odon Equitationio					014,410	010	309